

Indianapolis Department of Code Enforcement

1200 Madison Avenue, Suite 100

Indianapolis, IN 46225

Phone: (317) 327-4316

Fax: (317) 327-0817

New _____ Renewal _____

Annual License: \$335.00

One Day Permit: \$209.00

Local Fingerprint Fee: \$10.00



APPLICATION FOR
DANCE HALL LICENSE/PERMIT

Name of Applicant: _____ Phone Number: _____

Address Applicant: _____ Zip Code: _____

Business Name: _____ Phone Number: _____

Address of Business: _____ Zip Code: _____

Email Address: _____ Age of Applicant: _____

Length of time this business has been in Indianapolis: _____

Legal Status of Business: Individual Proprietor _____ Partnership _____ Corporation _____ LLC _____

If Corporation or LLC, list state where incorporated or authorized: _____

Registered Agent's name: _____

Registered Agent's Address: _____ Zip Code: _____

If Corporation, Principal Office of Corporation: _____

If Corporation or Partnership, list the name and address of each corporate officer or partner:

Has the applicant or any partner or corporate officer for the applicant business ever been denied a license or had a license revoked or suspended: Yes _____ No _____

Has the applicant, manager, partner, or any corporate officer of the business ever been arrested or convicted of a felony, misdemeanor or ordinance violation other than a minor traffic charge: Yes___ No_____

If yes, list type of conviction and jurisdiction: _____

Venue address_____ Zip code: _____

List the name and birth date of all security or management personnel related to the Dance Hall:

1. Name:_____ Birth Date:_____

2. Name:_____ Birth Date:_____

3. Name:_____ Birth Date:_____

4. Name:_____ Birth Date:_____

5. Name:_____ Birth Date:_____

6. Name:_____ Birth Date:_____

If security is provided by a separate company, please list the name of the company:

I understand that I am responsible for obtaining the following:

Retail Merchant Certificate Number:

(available at the State Department of Revenue: (317) 233-4015)

Federal Tax Identification Number:

(available at the State Department of Revenue: (317) 233-4015)

If the premise is licensed for the sale of alcoholic beverages, alcoholic beverages permit number:

(available from the venue or at the State Alcoholic Beverages Commission: (317) 232-2455)

The applicant has leased or owned the venue of the dance for what period of time?

If application is for a Dance Hall Permit, list the date the dance will be held:

If application is for a Dance Hall License, list maximum number of days per week that dances will be held:

List hours dance will be operating:

List size of dance floor:

Will any alcoholic beverages be served? Yes _____ No _____ Open to the public? Yes____ No _____

What is the admission fee being charged? _____ Age of event attendees? _____

List names and phone number of company providing security for dance:

Name: _____ Phone: _____

Will there be any restrictions (age, dress, audio/video equipment, etc.) for admission to dance?

Yes _____ No _____

If so, please list;

Please indicate that you agree or disagree by marking yes or no for the following:

1. Licensee is in good standing and has not had any license or registration to operate a business revoked or suspended: Yes_____ No_____
2. Licensee is current with all City, County and State for any taxes, license fees, or any other indebtedness: Yes_____ No _____
3. The person signing this application has the authority to sign for the business being licensed: Yes _____ No _____
4. Licensee will permit inspections of the business and premises by public authorities acting pursuant to law: Yes_____ No _____
5. Licensee will conduct the business and premises in such a manner as not to create a nuisance or any sort of hazard to the public: Yes_____ No_____
6. Licensee will keep the premises clean and free from any sort of rubbish or combustible or explosive material: Yes _____ No _____
7. Licensee agrees that the business and the premises on which the business is conducted will not be used for any unlawful purpose: Yes _____ No _____

8. Licensee agrees to comply with the Revised Code of Indianapolis and Marion County and all other applicable laws ordinances, regulations, orders and decisions of public officials:
Yes _____ No _____
9. Licensee understands that the license may be suspended or revoked, and the licensee will be subject to prosecution if any applicable law, ordinance, regulation, order or decision is violated:
Yes _____ No _____
10. Licensee agrees to apply in writing to the Department of Code Enforcement before changing the location of the business (if permitted by ordinance): Yes _____ No _____
11. Licensee agrees to give the Department of Code Enforcement written notice once the business ceases to exist:
Yes _____ No _____
12. Licensee agrees to give the Department of Code Enforcement written notice if there is any change in the licensed business during the term of the license such that the information provided in the application form is no longer complete or accurate within 30 days after such change occurs
Yes _____ No _____

The undersigned affirms under penalty for perjury that the answers, representations and information provided in this application are true and correct.

Signature

Name Printed

Date Signed